

GOLDSBORO POLICE DEPARTMENT

CITIZEN POLICE ACADEMY



INFORMATION PACKET & APPLICATION

FALL 2017 SESSION

GOLDSBORO
BE MORE DO MORE SEYMOUR
POLICE DEPARTMENT

APPLICATION DEADLINE: AUGUST 25, 2017

The Goldsboro Police Department is proud to offer the Citizen Police Academy program to the residents of Goldsboro and surrounding communities. We hope that you find the Academy to be very informative and eye-opening, and that you have a greater knowledge of the Goldsboro Police Department once completing the program. The mission of our Academy is to teach citizens about the philosophy, policies, and guiding principles of law enforcement and the ethical conduct governing police services in the community. It will give citizens an appreciation for the problems and challenges facing law enforcement.

The goals of the Goldsboro Police Department's Citizen Police Academy are to:

- *Build a stronger relationship between the community and the police department*
- *Create a better understanding of police functions by members of the public*
- *Provide the public with the opportunity for feedback and suggestions*
- *Increase community support and awareness about police operations through education and the exchange of ideas*
- *Create responsible, well-informed citizens who influence public opinion on police practices and services*

We thank you for your interest in our program. If selected to attend an Academy session, we encourage your interaction with police personnel as you will have to opportunity to ask questions, and offer comments, ideas, and solutions throughout the program. The Citizen Police Academy is a 9-week course with classes held weekly from 6:00pm – 9:00pm. There will be basic classroom instruction, presentations, demonstrations, and hands-on exercises offered each week for eight weeks. On the ninth week, the program concludes with a graduation ceremony. Please see the enclosed list of topics.

Please consider the following when applying to participate in the Citizen Police Academy:

- *Eligibility: The Citizen Police Academy is open to those who live, work, and play in and around the Goldsboro community. Priority participation is given to residents of the City of Goldsboro. The program's minimum age for participation is 18 years old; there is no maximum age. A criminal history will be conducted on all applicants to assist in determining eligibility for the program. While having criminal charges on your record will not automatically exclude you from participation, felony convictions will disqualify an applicant from participating in the program.*
- *Applications: Between 18 and 24 participants will be selected for each academy session. Applicants who are accepted to participate in the Academy will be notified approximately two weeks prior to the first class. Once an Academy class is full, those applicants found to be eligible for participation will be placed on a waiting list for attendance in the next class. All applicants will be notified whether or not they have been selected to attend the Academy. Please turn in only the application portion; retain the information packet for your records. Applications must be notarized. **Applications should be turned in at or mailed to the Goldsboro Police Department to the attention of Capt. Trey Ball or Sgt. Jason Adams.***
- *Academy classes: Generally, classes will be held at the Goldsboro Police Department in downtown Goldsboro. However, there will be class topics that will require the class to meet at other locations. You will be informed which classes will be in a different location, where that location is, and provided with directions prior to that class meeting.*
- *Cell phones & electronic devices: Please ensure these items are turned off or placed on silent mode before class starts to limit distractions and interruptions.*

- Attendance:
 - You are encouraged to attend all classes. The first class is mandatory as other guidelines and information will be discussed, and an overview of the program provided. If you miss this class, you will not be allowed to attend any other classes for that Academy session. You may reapply to attend a future session.
 - In order to receive a graduation certificate from the Academy, you can miss no more than one class per Academy session. You may elect to make-up this missed class during a future Academy session.
 - We understand that things happen and that you may have to miss more than one class. Should you miss two or more classes, you will be required to attend a future session on the topic missed to make-up the class in order to be awarded your certificate of completion.
 - Classes begin promptly at 6:00pm. Please arrive early to avoid interrupting the class.
- Questions:
 - Your questions are welcome; however, please ensure they pertain to the topic being discussed. Please do not belabor a question once it has been answered, but be willing to ask follow-up questions. If you need further explanation, make a note to ask the instructor during break or at the end of class.
 - Respect the questions of others in the class and give them time to ask their questions.
 - Again, if you are not satisfied with a question or would like additional information on a topic than was covered during class, make a note and follow-up with the instructor later.
- Evaluations: Your input is valuable. Please complete an evaluation form for EACH class. This information is a vital part of our program to let us know what we are doing well and how we can improve our Academy.
- Food & Drink:
 - Several local restaurants have partnered with us and have donated food items to be available to you prior to the beginning of each Academy class.
 - This food and drink will be available for you at 5:30pm each class session. Please arrive early to allow time to eat before class starts. Note: The food provide is not a full “sit-down” meal, rather heavy hors d'oeuvre-type selections.
 - Food and drink are allowed in the classroom, but please take caution to prevent spills. Drink and snack machines are available at the police department.
- Ride-Alongs:
 - Each Academy participant will have the opportunity to participate in the police department’s Ride-Along Program; however, this is not a required component of the Academy curriculum. You may opt to not ride if you so choose.
 - Initially, each participant may participate in only one ride-along. Depending on the level of interest, additional opportunities may be available.
 - If you do choose to participate in the Ride-Along Program, please plan to stay late after the first session so that we can discuss time & date options for you to participate. Additional information about the program will be provided at that time.
- **REMEMBER TO HAVE FUN AND ENJOY YOUR ACADEMY EXPERIENCE!!**

CITIZEN POLICE ACADEMY

MEETING DATES

Tuesday, September 12, 2017

Tuesday, September 19, 2017

Tuesday, September 26, 2017

Tuesday, October 3, 2017

Tuesday, October 10, 2017

Tuesday, October 17, 2017

Tuesday, October 24, 2017

MONDAY, October 30, 2017

Tuesday, November 7, 2017 – Graduation Reception

CLASS TOPICS

Academy Review

Department Overview & Tour

Police Ethics

Police Stress

Legal Review – Search & Seizure, Juvenile Law

Building Search Presentation & Practical Exercise

Traffic Safety & Enforcement Unit

Investigations & Crime Scene Unit Presentation – Case Solving Practical

Use of Force – Firearms Simulator

K-9 Program and Demonstration

Communications Center Presentation and Tour

**The topics listed above are subject to change and may not be presented in this order. They are provided here to give the applicant an idea of the areas that will be covered during the Citizen Academy.*

APPLICATION

Date: _____

First Name (full legal name) Middle Name Last Name

Address Street City State Zip Code

Drivers License # DL State Birthdate Age

Place of Birth Home Phone # Cell Phone #

Alias or Nicknames Social Security Number (last four)

Name for name-tag Name for certificate

Email Address S M L XL XXL Other:
Adult T-Shirt Size (circle one)

Describe any law enforcement experience that you possess:

List any special police interest/activities that you have:

List the reason(s) why you wish to attend the Citizen Police Academy

Have you ever been arrested or convicted of a crime? YES NO
If yes, explain (*Note: Felony convictions will disqualify the applicant from acceptance*):

Do you have any physical limitations or restrictions? _____ YES _____ NO
If yes, explain:

Do you wish to participate in the Goldsboro Police Department's Ride-Along Program while a participant in the Citizen Police Academy (not a required component of the CPA)?

_____ YES _____ NO

If yes, indicate your preferred shift and three dates you are available to participate:

SHIFT

DATES

_____ Day Shift – 6:00am-6:00pm
_____ Night Shift – 6:00pm-6:00am _____ 1st choice _____ 2nd choice _____ 3rd choice

List three (3) personal references (include complete names, addresses with City/State/Zip, and contact numbers):

Name	Address	Phone
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Name	Address	Phone
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Name	Address	Phone
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EMERGENCY CONTACT: Give the name, relationship, address and contact number of a person to contact on your behalf in the case of an emergency.

Name	Relationship
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Address	Phone
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I certify that all the information I have provided in this application is true and valid. I understand that any misstatement of material of facts in this application will be cause for disqualification from participation in the Citizen Police Academy. I further understand that by signing this application I give my permission for representative(s) of the Goldsboro Police Department to conduct a background investigation on me to assist in determining my eligibility to participate in the Citizen Police Academy.

Applicant Signature

Date

ASSUMPTION OF RISK AND INDEMNITY AGREEMENT /

PHOTOGRAPH AND VIDEO RELEASE FORM

WHEREAS, I, _____ have applied for and requested that I be allowed to participate in the Goldsboro Police Department Citizen Police Academy program and to be allowed as a passenger in the Police Department vehicles of the City of Goldsboro, North Carolina, and to accompany police officers of the City while engaged in the performance of their duties, to study and observe for my own benefit the functions and operations of the Goldsboro Police Department and its personnel; and

WHEREAS, the Police Department has explained to me some of the risks of accompanying an on-duty officer and has advised me that there is a risk of injury and death; and

WHEREAS, I desire to accompany Goldsboro Police officers at my own risk and I recognize the possible and inherent danger to my person and property; and

WHEREAS, the City of Goldsboro does not wish to be liable for any damages arising from injuries to me or my property;

NOW, THEREFORE, in consideration of allowing me to participate in the Citizen Police Academy and for the permission to accompany officers of the Goldsboro Police Department while engaged in the performance of their duties for myself, my spouse, heirs, executor or administrator, and personal representatives, I:

- a. Recognize and assume the risk for any personal injury to me or damage to my property which may occur, directly or indirectly, while riding in a police vehicle or accompanying any police officers of the City of Goldsboro while in the performance of their duties;
- b. Fully and forever release and discharge the City of Goldsboro, its agents and employees, from any and all claims, demands, damages, rights of actions, or causes of actions, present or future, resulting from or arising out of my accompanying any police officers of the City of Goldsboro while in the performance of their duties or while participating in the Citizen Police Academy;
- c. Agree to indemnify and hold harmless the City of Goldsboro, its officers and employees, for any acts or conduct of mine of whatever kind or nature while accompanying any police officers while in the performance of their duties or while participating in the Citizen Police Academy;
- d. Agree to defend and to pay any attorney fees as a result of any action brought by or against the City of Goldsboro, its officers or employees, for any wrongful acts or conduct of mine while accompanying any police officers in the performance of their duties or while participating in the Citizen Police Academy;
- e. Agree to abide by any applicable rules of the Goldsboro Police Department and to follow any directions or requests from officers I am accompanying or who are involved with the Citizen Police Academy;

- f. Agree that this Assumption of Risk and Indemnity Agreement be in full force and effect upon execution;
- g. Understand that I must obtain a supervisor's permission before I begin to ride with or accompany any police officers while engaged in the performance of their duties.
- h. Understand that no insurance coverage is provided by the City of Goldsboro.

FURTHERMORE, I hereby grant permission to the rights of my image, likeness and sound of my voice as recorded on audio or video tape without payment or any other consideration. I understand that my image may be edited, copied, exhibited, published or distributed, including without limitation, publications, advertisements, brochures, web sites, or other electronic displays and transmissions and waive the right to inspect or approve of the finished product wherein my likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of my image or recording. I also understand that this material may be used to advertise the Citizen Police Academy, in diverse educational settings, and in any other manner as deemed appropriate by the Goldsboro Police Department within an unrestricted geographical area.

- a. I will be consulted about the use of the photographs or video recordings for any purpose other than those listed above.
- b. There is no time limit on the validity of this release nor is there any geographic limitation on where these materials may be distributed.
- c. This release applies to photographic, audio, and/or video recordings collected as part of the Goldsboro Police Department Citizen Police Academy program.

 First Name (full legal name) Middle Name Last Name

 Address Street City State Zip Code

 Applicant Signature Date

Sworn to and subscribed before me the _____ day of _____, 20____ in _____, NC.

(NOTARY SEAL)

 Witness Signature

My commission expires: _____